

SCHEDULING ORDER

JD-CV-71 New 7-02

CONNECTICUT JUDICIAL BRANCH

SUPERIOR COURT

www.jud.state.ct.us

COURT USE ONLY

SCHORD



INSTRUCTIONS

1. Complete all sections and submit to the civil caseflow office or person with civil caseflow responsibilities.
2. All counsel and pro se parties of record must sign the fully completed form and retain a copy for their records.

JUDICIAL DISTRICT OF	CONFERENCE DATE (if known)	DOCKET NO.
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NAME OF CASE

ALTERNATIVE DISPUTE RESOLUTION

- Are all parties willing to refer the case to **PRIVATE ADR**? YES NO
- In court cases, are the parties willing to try the case before an **ATTORNEY TRIAL REFEREE**? YES NO
- In jury cases, are the parties willing to try the case (with a jury) before a **JUDGE TRIAL REFEREE**? YES NO

DISCOVERY ORDER

Per order of the Presiding Judge, the following discovery order is entered. Failure to comply with this order shall result in the entry of sanctions, including but not limited to nonsuit or default.

1. File Certificate of Closed Pleadings (JD-CV-11) by (date): _____
2. Written discovery requests and responses by (date): _____
3. Disclose
 Plaintiff's experts by (date): _____ Defendant's experts by (date): _____
4. Complete depositions of
 Fact witnesses by (date): _____
 Plaintiffs by (date): _____ Defendants by (date): _____
 Plaintiff's experts by (date): _____ Defendant's experts by (date): _____
5. Any motions for summary judgment shall be filed on or before (date): _____
6. Schedule Independent Medical Exam(s) (I.M.E.) by (date): _____

7. Motion to consolidate this case with the below-named case is to be filed and marked ready by (date): _____

DOCKET NO.	NAME OF CASE TO CONSOLIDATE WITH
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8. Other Orders: _____

Counsel and all pro se parties of record should indicate a date for pretrial, however it will still be subject to review by the court. Counsel and pro se parties will be notified of the date and time scheduled for pretrial.

9. A pretrial conference will be held in this case on or about (date): _____

AGREEMENT

NAME OF ATTORNEY/PRO SE*	NAME OF ATTORNEY/PRO SE*
NAME OF ATTORNEY/PRO SE*	NAME OF ATTORNEY/PRO SE*

* If necessary, attach additional sheet with names of counsel/pro se parties that are in agreement with the proposed order.

I hereby certify that this proposed order has been agreed to by all counsel and pro se parties of record.

SIGNED (Individual attorney or pro se party)

X

CERTIFICATION

I hereby certify that a copy was mailed/delivered to all counsel and pro se parties of record on:	DATE	SIGNED (Individual attorney or pro se party)	PHONE NO. (area code first)
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X

NAME OF EACH PARTY SERVED *	ADDRESS AT WHICH SERVICE WAS MADE*
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* If necessary, attach additional sheet with names of each party served and the address at which service was made.

ORDER (For Court Use Only)

The above proposed order having been considered, it is HEREBY ORDERED:

<input type="checkbox"/> GRANTED	<input type="checkbox"/> DENIED	SIGNED (Judge)	DATE ISSUED
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